Instructions for Online Renewals

(For educators not currently under contract with a NH school district or participating nonpublic school.)

Updated: Feb 25, 2014

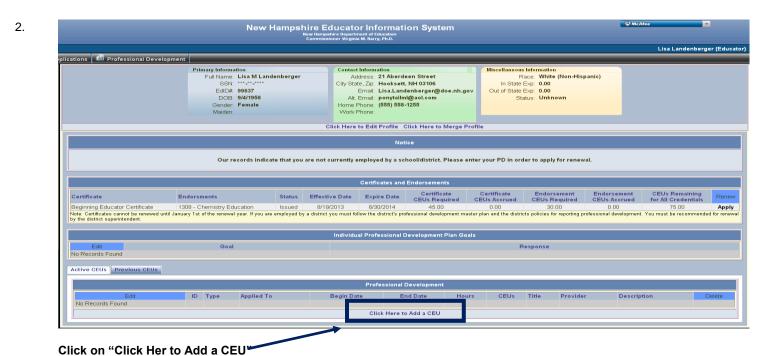
Online Non-Employed Renewal Instructions

Go to: https://my.doe.nh.gov

Log into your SSO/EIS account.

(if you do not already have an account see the Teacher certification brochure for instructions)





3.

5.

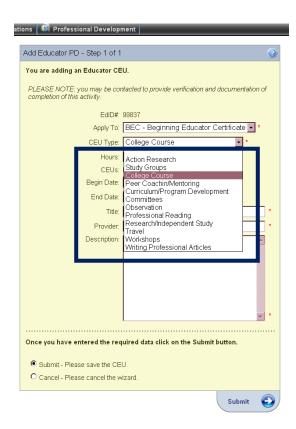
ons 🏻 🏭 Professional Development Add Educator PD - Step 1 of 1 You are adding an Educator CEU. PLEASE NOTE: you may be contacted to provide verification and documentation of completion of this activity. BEC - Beginning Educator Certificate Hours: Select CEU Type and Enter Hours Begin Date: MM/DD/YYYY * MM/DD/YYYY * Title: Provider Description: Once you have entered the required data click on the Submit button. Submit - Please save the CEU. Cancel - Please cancel the wizard.

The first line is the Apply to line. This automatically comes up with your credential. This is where you apply your 45 hours of Professional Growth.

Submit

ations 🏻 🏭 Professional Development Add Educator PD - Step 1 of 1 You are adding an Educator CEU. PLEASE NOTE: you may be contacted to provide verification and documentation of completion of this activity. EdID#: 99837 Apply To: BEC - Beginning Educator Certificate - * 7 mester Hours: 3 Begin Date: 01/02/13 End Date: 06/30/13 MM/DD/YYYY * Title: course Provider: UNH Description: Course Once you have entered the required data click on the Submit button. Submit - Please save the CEU. Cancel - Please cancel the wizard. Submit

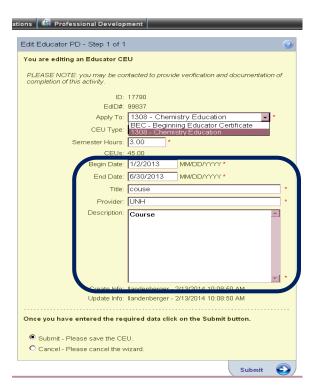
Enter number of hours the activity was for.



4.

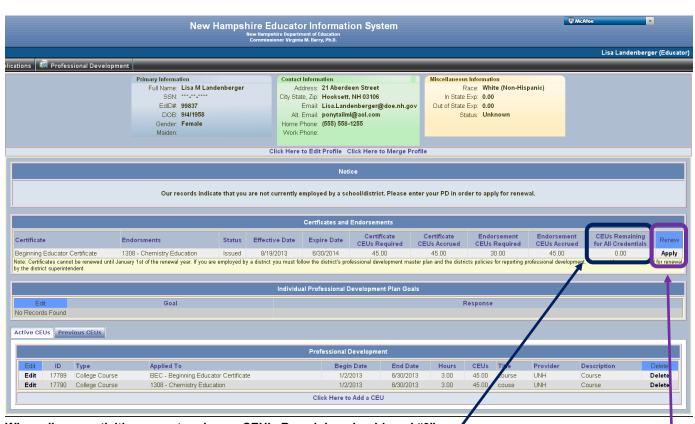
6.

CEU Type – gives you a list of types of activities you can use. Pick one.



Enter Begin date, end date, Title, who provided it, and a breif description of activity. Be sure as you enter activities that you are picking between your content area (30 hrs) and your credential (45 hrs).

8.



When all your activities are entered, your CEU's Remaining should read "0".

Record educator CEU/Hour goals - Step 1 of 8

You are recording your goals for meeting the CEU / Hour requirements and describing how they relate to the NH DOE Professional Development Master Plan

What are your goals for satisfying the requirements for 30 continuing education units for each endorsement area you are certified in and how do you anticipate these activities could affect student learning?

Response:

What are your goals for satisfying the requirement for 45 hours aligned with Ed. 505.07 and how do you anticipate these activities could affect student learning?

Response:

Describe how your individual plan is linked to the NH Department of Education Professional Development Master Plan.

Response:

Once you have entered the required data click on the Submit button.

Submit - Please save my responses to these questions.

Cancel - Please cancel the wizard.

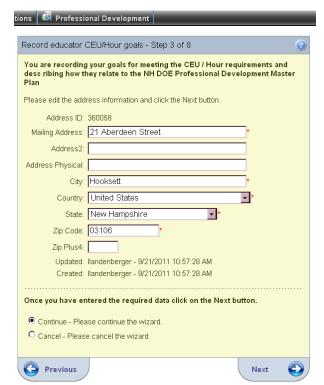
This brings you to the Goals page. This is where you enter your goals for the upcoming 3 year cycle.

Then click on the "Apply" link.

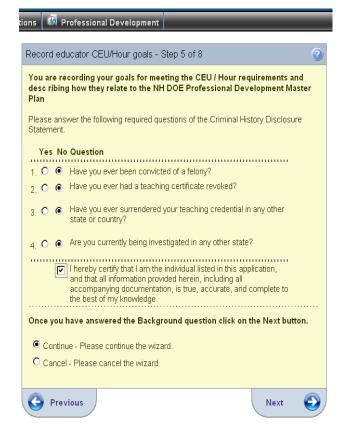
	ding your goals for meeting the CEU / Hour requirement: w they relate to the NH DOE Professional Development	
Please edit the	profile information and click the next button.	
SSN:	•	
Prefix:	¥	
First Name:	Lisa *	
Middle Initial:	M	
Last Name:	Landenberger *	
Maiden Name:		
Suffix:	¥	
Gender:	Female • *	
Birth Date:	9/4/1958 *	
Ethnicity:	White (Non-Hispanic)	
Once you have	e entered the required data click on the Next button.	
Continue -	Please continue the wizard.	
Cancel - Pl	ease cancel the wizard.	

Verify your information

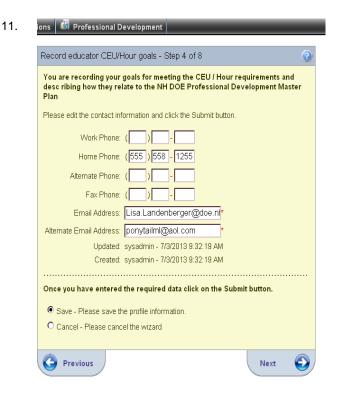
12.



Verify and update your mailing address.



Read carefully and answer all questions



Verify and update your phone numbers and email addresses.

Plan Please update the paym	ent information.
Fee Type:	Certificate (\$130.00)
Payment Type:	Credit Card *
Credit Card:	Mastercard • *
Credit Card #:	1234567891234567 * no spaces or dashes
Expiration Date:	06/2015 * (Example: 08/2011)
Verification Code:	123 *
	Please provide the name on the credit card. You must also provide the billing address for the credit card being used and this address must match the address on the credit card statement (the holder of the credit card's address, not the bank's address).
Name on Credit Card:	Lisa Landenberger *
Billing Address:	21 Aberdeen Street *
Billing Zip Code:	03106 *
Amount:	130.00 *
Once you have entere	d the required data click on the Submit button.
Save - Please save	·
 Save - Please save 	the fee information.

Enter your payment information.

PLEASE NOTE: Credit card (MC or VISA) payment is required for online applications. Credit cards are not accepted by phone, on paper, or at the NHDOE office.

13.